	HEATH CITY WATER PARK
OF HEATH	Membership Application

For Office Use Only: Payment Info		
Date:		
Amount:		
Check #:		
Visa: Cash:		

Application #

Initials:

## MEMBERSHIP DEFINITIONS:

<u>Household</u>: Any 5 persons living within the same household (residence). \$35.00 for each additional person residing in the household added to membership.

<u>Resident:</u> Must live within the city limits of Heath. A current utility bill constitutes proof of residency.

<u>Season Punch Pass:</u> Any business or educational institution whose primary function is instruction and/or supervision of children is eligible to purchase a Season Punch Pass to be shared between instructors. Pass is ONLY good when 5 or more children under instructor's supervision accompanies instructor. Business/educational institution must be within Heath city limits to be considered residents.

MEMBERSHIP TYPE: Please check one in each bo	
☐ Household ☐ Child (ages 5	is and under)
☐ Individual (ages 6 - 59) ☐ Senior (ages	60 and over)
PLEASE PRINT	
Name:	Primary Phone #: ()
Address:Street Address	City, State, Zip
	Phone #: <u>()</u>
Physician:	Phone #: <u>(</u> )
Health restrictions?: The Type If was place	
пеаните surctions ?. Шио ште s ii yes, pieas	e describe:
Member Name  Date of Birth Marketin Marketin Test II yes, pleas	
	F Member Name Date of Birth M/F
Member Name  Date of Birth  Material Ma	F Member Name Date of Birth M/F

<sup>\*</sup> If mailing your Water Park membership application, send the application and check payable to the <u>City of Heath</u> to: Heath City Hall \* 1287 Hebron Road \* Heath, Ohio 43056.